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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 030048094US	
Application Number <div style="text-align: center;">10/671,435-Conf. #2918</div>		Filed <div style="text-align: center;">September 24, 2003</div>	
For AIRPLANE WITH UNSWEPT SLOTTED CRUISE WING AIRFOIL			
Art Unit 3643		Examiner R. P. Swiatek	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$150	\$75 \$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$560	\$280 \$ 560.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1270	\$635 \$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1980	\$990 \$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2690	\$1345 \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiency in fees or credit any overpayment, to Deposit Account Number <u>50-0665</u> . WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,216</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
 _____ <div style="text-align: center;">John M. Wechkin</div> <div style="text-align: center;">Typed or printed name</div>		<div style="text-align: right;">November 29, 2011</div> <div style="text-align: right;">Date</div> <hr style="border: none; border-top: 1px solid black; margin: 5px 0;"/> <div style="text-align: right;">(206) 359-8000</div> <div style="text-align: right;">Telephone Number</div>	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.		